City of Jacksonville, Florida
Request for Budget Transfer Form

Department or Area Responsible for Contract / Compliance / Oversight

Council District(s)

Reversion of Funds: (if applicable)

Fund / Center / Account / Project * / Activity / Interfund / Future

Fiscal Yr(s) of carry over (all-years funds do not require a carryover)

Section of Code Being Waived (if applicable):

CIP (yes or no):

Justification for Waiver

Justification for / Description of Transfer:

Appropriating funding for contingency for City Council member salaries, benefits and positions on related RC.

Net Amount Appropriated and/or Transferred: $1,855,800.00

* This element of the account string is titled project but it houses both projects and grants.

CITY COUNCIL

Requesting Council Member:

CM's District:

Requesting Council Member:

CM's District:

Prepared By:

Ordinance:

OFFICE OF THE MAYOR

☐ BUDGET ORDINANCE ☐ TRANSFER DIRECTIVE

TD / BT Number:

	Date Rec'd.	Date Fwd.	Approved	Disapproved
Department Head				
Mayor's Office				
Accounting Division				
Budget Division				

Date of Action By Mayor:

Approved:

Division Chief:

Date Initiated:

Prepared By:

Phone Number:

Initiated / Requested By (if other than Department):

Exhibit 1
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Budget Transfer Line Item Detail

* This element of the account string is titled project but it houses both projects and grants.

TRANSFER FROM: (Revenue line items in this area are being appropriated and expense line items are being de-appropriated.)

			Total:	$1,855,800.00	Accounting Codes						
Rev Exp	Fund Title	Activity / Grant / Project Title	Line Item / Subobject Title	Amount	Fund	Center	Account	Project *	Activity	Interfund	Future
Exp	General Fund Operating	Council Member Direct Expenditures	Contingency	$1,855,800	00111	223001	599100	000000	00000000	00000	0000000

TRANSFER TO: (Revenue line items in this area are being de-appropriated and expense line items are being appropriated.)

			Total:	$1,855,800.00	Accounting Codes						
Rev Exp	Fund Title	Activity / Grant / Project Title	Line Item / Subobject Title	Amount	Fund	Center	Account	Project *	Activity	Interfund	Future
Exp	General Fund Operating	Council Member Direct Expenditures	Permanent and Probationary Salaries	$1,176,971	00111	223001	512010	000000	00000000	00000	0000000
			Payroll Taxes FICA	$54,438	00111	223001	521010	000000	00000000	00000	0000000
			Medicare Tax	$17,127	00111	223001	521020	000000	00000000	00000	0000000
			FRS Pension ER Contribution	$431,255	00111	223001	522040	000000	00000000	00000	0000000
			Disability Trust Fund-ER	$906	00111	223001	522070	000000	00000000	00000	0000000
			GEPP Defined Contribution DC-ER	$35,337	00111	223001	522130	000000	00000000	00000	0000000
			Group Dental Plan	$2,079	00111	223001	523010	000000	00000000	00000	0000000
			Group Life Insurance	$4,166	00111	223001	523030	000000	00000000	00000	0000000
			Group Hospitalization Insurance	$121,010	00111	223001	523040	000000	00000000	00000	0000000
			City Employees Worker's Comp	$1,899	00111	223001	524001	000000	00000000	00000	0000000
			Communication Allowance	$10,612	00111	223001	549077	000000	00000000	00000	0000000

Exhibit 1
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